

RIGHT-OF-WAY PERMIT APPLICATION

LAFAYETTE CITY ENGINEER'S OFFICE

You are required to notify the Lafayette City Engineering Dept @ 807-1050 (1) day in advance before commencement of work. Be prepared to supply project address and the permit number. *Inspection requirements (see below)

General Permit # _____

State Cut Permit # _____

Location/Address of Right-of-Way work: _____

Nearest Cross Street: _____ Lot # _____ Subdivision _____

Purpose of Right-of-Way work: _____

Starting Date ____/____/____ Approximate Completion Date ____/____/____

Right-of-Way Excavation Size & Description: _____

Street Cut ____ Pavement Type: ____ Asphalt Pavement ____ Concrete Pavement ____ Asphalt over Concrete Pavement

Other Information: ____ Planting Strip ____ Aerial ____ Alley ____ Replace Sidewalk ____ New Sidewalk ____ Curb

Driveway: ____ New driveway ____ Replace driveway approach ____ Widen driveway approach

APPLICANT INFORMATION

Owner: _____ Phone: _____

Address: _____

Contractor: _____ Phone: _____

Address: _____

****Note: Two Inspections are required 1) Pre-Concrete (after compacted and cut backs in place) and 2) Post-Asphalt (after asphalt is in place). Applicant must schedule Inspections 48 HOURS in advance @ 807-1050.***

I, the undersigned do hereby agree to make this excavation under the supervision and inspection of the Public Works Inspector, and in accordance with the Lafayette Code of Ordinance Sec 8.03.010 "Permit Required".

(Applicant Printed Name)

Applicant Signature)

Date ____/____/____

For Office Use Only

Permit Approved by: _____

Date ____/____/____

Extension Date ____/____/____

Extension Approved by: _____

____ Pre-Concrete Inspection Approved

____ Post-Asphalt Inspection Approved

Final Inspection & Accepted by _____

Date ____/____/____

Indiana Underground: 1-800-382-5544

Lafayette Water: 765-807-1700

Water Pollution Control Dept.: 765-807-1800